



Fact Sheet:

Division of Developmental Disabilities Waiver Plan

<p><i>This Fact Sheet provides an overview of the Division of Developmental Disabilities' CMS Waivers</i></p>	<p>Four Home and Community Based (HCBS) Waivers</p> <p>The Department offers services under four targeted waivers – <i>Basic, Basic Plus, Core, and Community Protection</i> - each with specific limits on benefits, services and enrollees. All of the waivers are at capacity enrollment.</p>
	<p>Waiver Eligibility</p> <ul style="list-style-type: none"> • The individual is a client of the Division of Developmental Disabilities (DDD). • The individual has a disability according to criteria established in the Social Security Act. • The individual's gross income does not exceed 300 percent of the Supplemental Security Income (SSI) benefit amount, <u>and</u> the individual's resources do not exceed \$2,000 <u>or</u> the individual is enrolled in the Healthcare for Workers with Disabilities (HWD) Medicaid program. Parental income is not considered for children. • The individual needs the level of care provided in an Intermediate Care Facility for the Mentally Retarded (ICF/MR). • A Plan of Care (POC) has been prepared, which shows how the individual's health, safety, and habilitation needs will be met in the community. • The individual has agreed to accept home and community based services as an alternative to institutional services.

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Basic Waiver Targeting Criteria	<ul style="list-style-type: none">• Individuals on this waiver live with family or in their own homes.• They have a strong natural support system.• The family/caregiver's ability to continue caring for the individual is at risk, but can be continued with the addition of services provided in the Basic Waiver.• The individual does not need out-of-home residential services.
Basic Plus Waiver Targeting Criteria	<ul style="list-style-type: none">• Individuals on this waiver require a higher level of services than those on the Basic Waiver and/or they require nursing services.• The individuals live with family or in another setting with assistance and are at <u>high</u> risk of out-of-home placement or loss of their current living situation.• Individuals may live in an adult family home or adult residential care facility.
Core Waiver Targeting Criteria	<ul style="list-style-type: none">• Individuals on this waiver are at <u>immediate</u> risk of out-of-home placement or are receiving residential habilitation services from a DDD contracted residential provider.
Community Protection Waiver Targeting Criteria	<ul style="list-style-type: none">• Individuals on this waiver meet the DDD criteria for "community protection."• They require 24-hour, on-site staff supervision to ensure the safety of others.• They require therapies and/or other habilitation services.• The individuals agree to receive services from a certified Community Protection Supported Living provider.

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Waiver Services and Yearly Limits		
	Services	Yearly Limit
Basic Waiver	Behavior Management & Consultation Community Guide Environmental Accessibility Adaptations Specialized Medical Equipment/Supplies Occupational Therapy Specialized Psychiatric Services Physical Therapy Speech, Hearing and Language Services Staff/Family Consultation and Training Transportation	\$1,454 per year on any combination
	Person to Person Supported Employment Community Access Pre-vocational Services	May not exceed \$6,631 per year
	<u>Mental Health Stabilization Services:</u> Behavior Management and Consultation Mental Health Crisis Diversion Bed Services Specialized Psychiatric Services Skilled Nursing	Limits determined by Mental Health or DDD
	Personal Care	Limits determined by the CARE assessment
	Respite Care	Limits determined by respite assessment
	Emergency Assistance	\$6,000 per year (pre-authorization required)

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	Services	Yearly Limit
Basic Plus Waiver	Skilled Nursing and all of the general services in the Basic Waiver	\$6,192 per year on any combination
	Person to Person Supported Employment Community Access Pre-vocational Services	May not exceed \$9,691 per year. In some situations, this limit may be increased to a maximum of \$19,381 based on assessed client need and only with prior authorization.
	<u>Mental Health Stabilization Services:</u> Behavior Management and Consultation Mental Health Crisis Diversion Bed Services Specialized Psychiatric Services Skilled Nursing	Limits determined by Mental Health or DDD
	Personal Care	Limits determined by the CARE assessment
	Respite Care	Limits determined by respite assessment
	Adult Foster Care (Adult Family Home) Adult Residential Care (Boarding Home)	Determined by department rate structure in CARE
	Emergency Assistance	\$6,000, per year (pre-authorization required)
Core Waiver	Residential Habilitation and all of the Basic Plus services except Emergency Assistance, Adult Family Home and Adult Residential Care services	Limited to the average cost of an ICF/MR for any combination of services necessary to meet assessed client need
Community Protection Waiver	All Core services except Personal Care, Respite, Community Guide, and Community Access. Note: some definitions differ in this waiver.	Limited to the average cost of an ICF/MR for any combination of services necessary to meet assessed client need. Residential services are offered only in DDD Certified Supported Living. Clients must agree to their Community Protection Care Plan.

Visit the DDD Internet website at <http://www1.dshs.wa.gov/ddd/index.shtml>